



AGENDA AND REPORTS
JULY 15, 2020
1:30 PM

JOIN ZOOM MEETING

<https://permainc.zoom.us/j/5455080980?pwd=RnVPRi9MaWFGdjF0aVZBWjFIdEZEZz09>

Meeting ID: 545 508 0980

Password: hifjuly#20

OR

DIAL BY YOUR LOCATION

+1 312 626 6799 US (Chicago)

+1 929 205 6099 US (New York)

Meeting ID: 545 508 0980

Password: 9907898214

PUBLIC MEETINGS ACT - In accordance with the Open Public Meetings Act, notice of this meeting was provided by:

- I.** sending sufficient notice to the Asbury Park Press
- II.** filing advance written notice of this meeting with each member municipalities and,
- III.** posting this notice on the Public Bulletin Board of all member municipalities

CENTRAL JERSEY HEALTH INSURANCE FUND
AGENDA MEETING: JULY 15, 2020
CONFERENCE CALL/ZOOM MEETING
1:30 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE

ROLL CALL OF 2020 EXECUTIVE COMMITTEE

APPROVAL OF MINUTES: MAY 20, 2020 Open: Appendix I

CORRESPONDENCE - None

REPORTS:

EXECUTIVE DIRECTOR (PERMA)

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PROGRAM MANAGER- (Conner Strong & Buckelew)

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TREASURER - (Stephen Mayer)

June 2020 Bills List (Confirmation of Payment).....Page 9

June 2020 Supplemental Bills List (Confirmation of Payment)Page 11

July 2020 Bills List (Resolution 20-20).....TBD

June and July 2020 Bills List: Resolution 20-20.....Page 15

Confirmation of Claims Paid/Certification of Transfers

Ratification of Treasurers Report

ATTORNEY - (John C. Sahradnik, Esq.)

Monthly Report

NETWORK & THIRD PARTY ADMINISTRATOR - (Aetna)

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NETWORK & THIRD PARTY ADMINISTRATOR - (AmeriHealth)

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PRESCRIPTION ADMINISTRATOR - (Express Scripts)

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DENTAL ADMINISTRATOR - (Delta Dental)

Monthly Report

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT

RESOLUTION - EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES

PERSONNEL - CLAIMS - LITIGATION

MEETING ADJOURNED

Central Jersey Health Insurance Fund

Executive Director's Report

July 15, 2020

FINANCE AND CONTRACTS

PRO FORMA REPORTS

- **Fast Track Financial Report – as of May 31, 2020 (page 2)**
- **Ratio Report – As of May 31, 2020 (page 3)**
 - April, May and preliminary results from June are all significantly under budget due to postponed services.
 - There were some outstanding member receivables from prior Fund Years that were transferred to their closed year balances. This transfer appears in the Dividend line on the Fast Track.
 - The Fund continues to own a healthy surplus to sustain any impact from COVID -19.

2021 BUDGET PROCESS

We are beginning the process of collecting data to support the 2021 budget process. As a preview:

- We anticipate a low Medicare Advantage renewal.
- The CJHIF had very little penetration into the reinsurance level, so a positive renewal from the MRHIF is also expected.
- The ESI market check process may produce improved contractual terms for Rx claims.
- We will be negotiating with claims agents for 2021 fees and implementing the results of last year's RFP processes for most other vendors and professionals.
- Dividend options will be presented, which could be included in the budget or to assist members with possible budget constraints due to COVID.

AHA AUDIT

The AmeriHealth Audit has been completed and recommendation/questions have been addressed by AmeriHealth. Overall, the financial results were above industry standards. There were some customer service issues that were found but have since been addressed.

There were some non-financial performance guarantees that were not met in 2019, of which the Funds will receive 2% of their fees back.

CENTRAL JERSEY HEALTH INSURANCE FUND
FINANCIAL FAST TRACK REPORT
AS OF May 31, 2020

	<i>THIS MONTH</i>	<i>YTD CHANGE</i>	<i>PRIOR YEAR END</i>	<i>FUND BALANCE</i>
1. UNDERWRITING INCOME	3,747,862	19,046,833	695,564,256	714,611,089
2. CLAIM EXPENSES				
Paid Claims	2,089,703	12,822,192	571,937,112	584,759,303
IBNR	95,187	137,761	2,011,000	2,148,761
Less Specific Excess	-	(62,751)	(16,195,232)	(16,257,983)
Less Aggregate Excess	-	-	(1,000,000)	(1,000,000)
TOTAL CLAIMS	2,184,890	12,897,202	556,752,880	569,650,082
3. EXPENSES				
MA & HMO Premiums	194,507	962,931	16,066,100	17,029,032
Excess Premiums	155,974	783,546	33,089,412	33,872,958
Administrative	245,905	1,226,132	39,687,626	40,913,757
TOTAL EXPENSES	596,385	2,972,609	88,843,138	91,815,747
4. UNDERWRITING PROFIT (1-2-3)	966,586	3,177,022	49,968,239	53,145,260
5. INVESTMENT INCOME	5,646	108,027	3,596,342	3,704,368
6. DIVIDEND INCOME	0	0	6,550,471	6,550,471
7. STATUTORY PROFIT (4+5+6)	972,232	3,285,049	60,115,051	63,400,100
8. DIVIDEND	249,129	249,129	38,150,258	38,399,387
9. STATUTORY SURPLUS (7-8)	723,104	3,035,920	21,964,793	25,000,713

SURPLUS (DEFICITS) BY FUND YEAR

Closed	Surplus	(247,439)	(208,341)	6,250,858	6,042,517
	Cash	(660,852)	(616,462)	7,537,967	6,921,506
2018	Surplus	(14,666)	111,016	3,698,480	3,809,496
	Cash	544,571	447,299	3,254,933	3,702,232
2019	Surplus	(56,906)	410,164	3,776,418	4,186,581
	Cash	60,830	1,144,874	3,246,782	4,391,655
LAKEWOOD	Surplus	557,466	760,096	8,239,037	8,999,133
	Cash	561,418	(203,498)	7,345,281	7,141,783
2020	Surplus	484,648	1,962,985		1,962,985
	Cash	1,588,790	2,333,665		2,333,665
TOTAL SURPLUS (DEFICITS)		723,104	3,035,920	21,964,793	25,000,713
TOTAL CASH		2,094,757	3,105,877	21,384,964	24,490,841

CLAIM ANALYSIS BY FUND YEAR

TOTAL CLOSED YEAR CLAIMS	81	(4,731)	481,334,512	481,329,781
FUND YEAR 2018				
Paid Claims	15,495	13,171	18,486,136	18,499,308
IBNR	-	(107,131)	107,131	0
Less Specific Excess	-	279	(18,469)	(18,190)
Less Aggregate Excess	-	0	0	0
TOTAL FY 2018 CLAIMS	15,495	(93,681)	18,574,799	18,481,118
FUND YEAR 2019				
Paid Claims	56,031	969,638	17,685,051	18,654,689
IBNR	0	(1,315,841)	1,335,869	20,028
Less Specific Excess	0	(49,730)	(2,724)	(52,454)
Less Aggregate Excess	0	0	0	0
TOTAL FY 2019 CLAIMS	56,031	(395,933)	19,018,196	18,622,262
LAKEWOOD				
Paid Claims	442,160	4,266,405	38,707,584	42,973,990
IBNR	(2,130)	39,877	568,000	607,877
Less Specific Excess	0	(13,300)	(1,450,212)	(1,463,512)
Less Aggregate Excess	0	0	0	0
TOTAL LAKEWOOD 2020 CLAIMS	440,030	4,292,982	37,825,373	42,118,355
FUND YEAR 2020				
Paid Claims	1,575,936	7,577,708		7,577,708
IBNR	97,317	1,520,856		1,520,856
Less Specific Excess	0	0		0
Less Aggregate Excess	0	0		0
TOTAL FY 2020 CLAIMS	1,673,253	9,098,564		9,098,564
COMBINED TOTAL CLAIMS	2,184,890	12,897,202	556,752,879	569,650,081

This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund.

CENTRAL JERSEY HEALTH INSURANCE FUND RATIOS

FY 2020

INDICES	2019	JAN	FEB	MAR	APR	MAY
Cash Position	21,384,964	\$ 20,922,967	\$ 18,961,597	\$ 19,369,527	\$ 22,396,084	\$ 24,490,841
IBNR	2,011,000	\$ 2,300,835	\$ 2,391,435	\$ 2,026,179	\$ 2,053,575	\$ 2,148,761
Assets	25,501,413	\$ 25,747,051	\$ 26,342,114	\$ 26,928,341	\$ 27,887,900	\$ 28,303,571
Liabilities	3,536,625	\$ 3,809,523	\$ 3,968,402	\$ 3,593,541	\$ 3,610,296	\$ 3,302,863
Surplus	21,964,788	\$ 21,937,528	\$ 22,373,713	\$ 23,334,800	\$ 24,277,604	\$ 25,000,708
Claims Paid -- Month	2,046,195	\$ 2,781,482	\$ 2,939,994	\$ 2,738,681	\$ 2,280,316	\$ 2,091,550
Claims Budget -- Month	2,886,174	\$ 3,233,619	\$ 3,233,619	\$ 3,233,619	\$ 3,233,619	\$ 3,233,619
Claims Paid -- YTD	29,337,408	\$ 2,781,482	\$ 5,721,477	\$ 8,460,157	\$ 10,740,474	\$ 12,832,024
Claims Budget -- YTD	34,271,231	\$ 3,233,619	\$ 6,467,238	\$ 9,700,857	\$ 12,934,476	\$ 16,168,095
RATIOS						
Cash Position to Claims Paid	10.45	7.52	6.45	7.07	9.82	11.71
Claims Paid to Claims Budget -- Month	0.71	0.86	0.91	0.85	0.71	0.65
Claims Paid to Claims Budget -- YTD	0.86	0.86	0.88	0.87	0.83	0.79
Cash Position to IBNR	10.63	9.09	7.93	9.56	10.91	11.40
Assets to Liabilities	7.21	6.76	6.64	7.49	7.72	8.57
Surplus as Months of Claims	7.61	6.78	6.92	7.22	7.51	7.73
IBNR to Claims Budget -- Month	0.70	0.71	0.74	0.63	0.64	0.66

REGULATORY
CENTRAL JERSEY HEALTH INSURANCE FUND
YEAR: 2020 AS OF MAY 14, 2020

<u>Monthly Items</u>	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	List of Compliance included on Page 5
New Members	N/A
Withdrawals	N/A
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	9/30/2019 Filed
Annual Audit	12/31/2018 filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	List of Compliance included below
Benefit Changes	N/A

Fund Professional	Contract Received	Insurance Received	Contract Term
Administration	Yes	Yes	1/1/2019 - 12/31/2021
Attorney	Yes	Yes	1/1/2020-12/31/2020
Treasurer	Yes	Yes	1/1/2020-12/31/2020
Auditor	Yes	Yes	1/1/2020-12/31/2020
Program Manager	yes	Yes	1/1/2019 - 12/31/2021
Actuary	Yes	Yes	1/1/2020-12/31/2020
TPA - Aetna	yes	in progress	1 year renewal negotiated
TPA - AmeriHealth	in progress	in progress	1 year renewal negotiated
TPA - Delta Dental	yes	in progress	1 year renewal negotiated

INDEMNITY AND TRUST AGREEMENTS - CURRENT AS OF JULY 10, 2020

Member	I&T end date
Western Monmouth Utilities Authority	12/31/2017
Barnegat Light	12/31/2018
Brick Twp Housing Authority	12/31/2018
Manchester Township	12/31/2018
Keyport	6/30/2020
Allentown	12/31/2020
Atlantic Highlands Borough	12/31/2020
Bedminster Township	12/31/2020
Brielle Borough	12/31/2020
Highland Elementary School	12/31/2020
Lakewood Township	12/31/2020
Matawan	12/31/2020
Ship Bottom Borough	12/31/2020
Spring Lake	12/31/2020
Toms River MUA	12/31/2020
Tuckerton Borough School District	12/31/2020
West Long Branch	12/31/2020
South River	12/31/2021
Oceanport	12/31/2021
Aberdeen	12/31/2021
Brick Township	12/31/2021
Eatontown Sewerage Authority	12/31/2021
Englishtown	12/31/2021
Jackson Township	12/31/2021
Manasquan	12/31/2021
Manasquan River Regional Sewerage Authority	12/31/2021
Montgomery Township	12/31/2021
Plumsted Township	12/31/2021
Red Bank	12/31/2021
Shrewsbury Township	12/31/2021
Asbury Park City	12/31/2022
Seaside Heights BOE	12/31/2022
Harvey Cedars	12/31/2022

Central Jersey Health Insurance Fund

Program Manager's Report

July 2020

Program Manager: Conner Strong & Buckelew

Online Enrollment Training: kkidd@permainc.com

Enrollments/Eligibility/Billing: cjhifenrollments@permainc.com

Brokers: brokerservice@permainc.com

ELIGIBILITY/ENROLLMENT:

Please direct any eligibility, enrollment, or system related questions to our dedicated CJHIF enrollment team. The team can be reached by email at cjhifenrollments@permainc.com or by fax at 856-552-2175.

MONTHLY BILLING

As a reminder, please be sure to check your monthly invoice for accuracy. *Please confirm the invoice detail as retro adjustments are limited to two months by Fund policy.* If you find a discrepancy, please report it to the CJHIF eligibility/enrollment team cjhifenrollments@permainc.com or by fax at 856-552-2175.

BROKER CONTACT INFORMATION

Please direct any escalated claims, benefit coverages, prescription coverage, Medicare advantage or appeal related questions to our dedicated CJHIF Client Servicing Team. The team can be reached by email at brokerservices@permainc.com.

CONNER STRONG COVID-19 RESOURCES

Conner Strong & Buckelew has compiled a database of COVID-19 resources available to our clients. To access the resource center please use the link below.

- Link-<https://www.connerstrong.com/insights/covid-19-resource-center/>

AETNA UPDATE

Aetna Retiree- Specialty Rx Update- Aetna has made the decision to consolidate Aetna Specialty Pharmacy into CVS Specialty. New patients will begin using CVS Specialty June 1, 2020. On June 26, Aetna will begin to transition existing patients and prescriptions. The transition will continue through the end of September. This will occur in waves, by therapy. Aetna expects it to be a seamless process for our patients and providers. Also please note no new ID cards will be issues.

What members can expect:

- Prescriptions with remaining refills will transfer to CVS Specialty
- Members with a current Aetna Specialty prescription will be sent the attached (Member) letter in advance of the script transfer
- Reminder inserts in the last Aetna Specialty Pharmacy order (see attached)
- CVS Specialty will contact patients to set up their first order
- The logo on the prescription label will be CVS Specialty
- All notices or letters accompanying orders will come from CVS Specialty

EXPRESS SCRIPTS UPDATE

SaveOnSP Update - SaveonSP continues to monitor the specialty medication market and associated manufacturer copay assistance programs to align the program with the available copay manufacturer assistance funds to maximize your savings opportunity. **Effective 7/1/2020, the following changes will be made to the SaveonSP Drug List attached to your agenda.**

- Drug names highlighted in green have been added to the program - impacted members will receive a letter (sample attached) and follow-up calls from SaveonSP.
- Drug names highlighted in blue experienced a change in copay - impacted members will be notified by SaveonSP.
- Drug names highlighted in red were removed from the SaveOnSP program - impacted members will receive outreach calls from a SaveOnSP representative.

Pharmacy Network Update- Effective August 16, 2020, Sam's Club Pharmacies will no longer be part of the CJHIF standard network of ESI pharmacies. ESI will be reaching out directly to impacted members. There is one impacted member in the CJHIF.

Delta Dental Update: Delta Dental announced updated Call Center hours, 8:00AM-6:30PM (Mon-Thurs) & 8:00AM-5:00PM (Friday).

LEGISLATIVE UPDATE

"Back to Work" COVID-19 Tests: Insurers are not required to cover COVID-19 tests that employers may mandate as they bring employees back to work. The Families First Coronavirus Response Act (FFCRA) requires insurers to cover COVID-19 tests without patient cost-sharing, however guidance clarified that the law only applies to tests that are deemed "*medically appropriate*" by a healthcare provider. This latest guidance suggests that if an employer mandates COVID-19 testing as a condition for returning to work, it is not required to be covered by insurance. The CJHIF will continue to cover COVID-19 testing when deemed medically necessary by a healthcare professional in accordance with CDC guidelines but *will not* be covering employer-mandated testing.

PCORI Fee Update- The annual PCORI fee has been extended for another 10 years through September 30th, 2029. As a courtesy, the CJHIF pays the PCORI fee on behalf of Fund members.

NJ Senate Bill 2273/A20 - Educator's Health Benefit Fairness Act - Passed by Assembly on July 1, 2020. The Executive Director and Program Manager offices have been closely following the legislation and preparing for implementation on January 1, 2021. We will be working with the Risk

Managers and Leadership for the School Boards in the Fund, to assure compliance with all components.

Key Legislative Components:

- Requires SEHBP and eligible employers that do not participate in the SEHBP to provide certain plans for public education employees and certain public education retirees.
- Requires these plans be offered to public education employees at a salary-based contribution schedule, which will be an alternative to Chapter 78.
- The first plan, *NJ Educator's Health Plan* must be offered on January 1, 2021
 - A special open enrollment will be held for School Boards in the fall
 - All new employees hired after July 1, 2020 will be required to enroll in the *Educators Plan* on January 1, 2021.

ADMINISTRATIVE AUTHORIZATIONS

There are no appeals or authorizations to report.

CENTRAL JERSEY HEALTH INSURANCE FUND

BILLS LIST

Confirmation of Payment

JUNE 2020

WHEREAS, the Treasurer has certified that funding is available to pay the following bills:

BE IT RESOLVED that the Central Jersey Health Insurance Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

FUND YEAR 2019

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
001570			
001570	HOLMAN, FRENIA, ALLISON, P.C.	PROGRESS BILL 5/20	1,908.33
001570	HOLMAN, FRENIA, ALLISON, P.C.	PROFESSIONAL SERVICES 4/20	52.00
			1,960.33
		Total Payments FY 2019	1,960.33

FUND YEAR 2020

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
001571			
001571	AETNA HEALTH MANAGEMENT LLC	MEDI ADVTG 6/20	192,648.76
			192,648.76
001572			
001572	Flagship Health System	DMO 6/20	1,029.91
			1,029.91
001573			
001573	DELTACARE USA	DMO 3.20 4.20 5.20 6.20	4,258.70
			4,258.70
001574			
001574	SaveonSP LLC	CLAIMS ADMIN FEE - ESI - 4/20 - LAKEWOOD	5,873.75
001574	SaveonSP LLC	CLAIMS ADMIN - ESI - 4/20	8,506.50
			14,380.25
001575			
001575	QUALCARE, INC.	COST CONTAINMENT 5/20	320.00
			320.00
001576			
001576	AETNA LIFE INSURANCE COMPANY	VISION 6/20	119.21
001576	AETNA LIFE INSURANCE COMPANY	TPA ADMIN 6/20	78,468.12
			78,587.33
001577			
001577	AMERIHEALTH ADMINISTRATORS	TPA ADMIN 6/20	774.25
			774.25
001578			
001578	PAYFLEX	OCEANPORT 6/20	99.00
001578	PAYFLEX	MRRSA 6/20	9.00
			108.00
001579			
001579	DELTA DENTAL OF NEW JERSEY INC	DENTAL 6/20	6,411.60
			6,411.60
001580			
001580	PERMA RISK MANAGEMENT SERVICES	POSTAGE FEE 5/20	1.20
001580	PERMA RISK MANAGEMENT SERVICES	ADMIN FEE 6/20	32,197.42
			32,198.62
001581			
001581	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 6/20	2,976.00
			2,976.00
001582			
001582	STEPHEN MAYER	TREASURER FEE 6/20	1,000.00
			1,000.00
001583			
001583	ASBURY PARK PRESS	ACCT:ASB-128965 - AD - 5.15.20	12.15
			12.15
001584			
001584	TROPHY KING OF PARSIPPANY	CLOCK FOR JG 6/20	115.00
			115.00
001585			
001585	ALLSTATE INFORMATION MANAGEMNT	ACCT#420 - ARC & STOR - 4.30.20	60.44
			60.44

001586			
001586	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 6/20	833.33
001586	CONNER STRONG & BUCKELEW	BENEFITS CONSULTANT FEES 6/20	25,169.08
			26,002.41
001587			
001587	LAKEWOOD TOWNSHIP	DIVIDEND FUNDS FOR WELLNESS GRANT	11,547.95
			11,547.95
001588			
001588	MUNICIPAL REINSURANCE H.I.F.	REINSURANCE 6/20	90,811.20
			90,811.20
001589			
001589	WESTPORT INSURANCE CORP	SPECIFIC - SINGLE 6/20	9,148.98
001589	WESTPORT INSURANCE CORP	AGGREGATE 6/20	2,462.46
001589	WESTPORT INSURANCE CORP	SPECIFIC - FAMILY 6/20	54,128.88
			65,740.32
		Total Payments FY 2020	528,982.89
		TOTAL PAYMENTS ALL FUND YEARS	\$530,943.22

Chairperson

Attest:

Dated: _____

I hereby certify the availability of sufficient unencumbered funds in the proper accounts to fully pay the above claims.

Treasurer

CENTRAL JERSEY HEALTH INSURANCE FUND

SUPPLEMENTAL BILLS LIST

Confirmation of Payment

JUNE 2020

WHEREAS, the Treasurer has certified that funding is available to pay the following bills:

BE IT RESOLVED that the Central Jersey Health Insurance Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

FUND YEAR 2020

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
001590			
001590	CONNER STRONG & BUCKELEW	UNDER PAYMENT 6/20	83,244.89
			83,244.89
		Total Payments FY 2020	83,244.89
		TOTAL PAYMENTS ALL FUND YEARS	\$83,244.89

Chairperson

Attest:

Dated: _____

I hereby certify the availability of sufficient unencumbered funds in the proper accounts to fully pay the above claims.

Treasurer

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES									
Central Jersey Health Insurance Fund									
Month		May							
Current Fund Year		2020							
		1.	2.	3.	4.	5.	6.	7.	8.
Policy Year	Coverage	Calc. Net Paid Thru Last Month	Monthly Net Paid May	Monthly Recoveries May	Calc. Net Paid Thru May	TPA Net Paid Thru May	Variance To Be Reconciled	Delinquent Unreconciled Variance From	Change This Month
2020	Med	3,471,468.28	1,037,880.16		4,509,348.44		4,509,348.44	3,471,468.28	1,037,880.16
	Dental	413,798.07	21,712.48		435,510.55		435,510.55	413,798.07	21,712.48
	Rx	2,087,261.54	544,574.89		2,631,836.43		2,631,836.43	2,087,261.54	544,574.89
	Vision								
	Total	5,972,527.89	1,604,167.53		7,576,695.42		7,576,695.42	5,972,527.89	1,604,167.53
2019	Med	11,323,695.38	54,108.99		11,377,804.37		11,377,804.37	11,323,695.38	54,108.99
	Dental	1,504,753.27	1,922.30		1,506,675.57		1,506,675.57	1,504,753.27	1,922.30
	Rx	6,555,169.64			6,555,169.64		6,555,169.64	6,555,169.64	
	Vision								
	Total	19,383,618.29	56,031.29		19,439,649.58		19,439,649.58	19,383,618.29	56,031.29
2018	Med	11,972,437.46	(1,112.30)		11,971,325.16		11,971,325.16	11,972,437.46	(1,112.30)
	Dental	1,331,867.97			1,331,867.97		1,331,867.97	1,331,867.97	
	Rx	6,184,930.24			6,184,930.24		6,184,930.24	6,184,930.24	
	Vision								
	Total	19,489,235.67	(1,112.30)		19,488,123.37		19,488,123.37	19,489,235.67	(1,112.30)
2017	Med	175,983,905.39	80.90		175,983,986.29		175,983,986.29	175,983,905.39	80.90
	Dental	73,216,661.91			73,216,661.91		73,216,661.91	73,216,661.91	
	Rx	73,216,661.91			73,216,661.91		73,216,661.91	73,216,661.91	
	Vision								
	Total	322,417,229.21	80.90		322,417,310.11		322,417,310.11	322,417,229.21	80.90
2016	Med	10,514,921.71	196,822.24		10,711,743.95		10,711,743.95	10,514,921.71	196,822.24
	Dental								
	Rx	3,511,052.74	245,337.64		3,756,390.38		3,756,390.38	3,511,052.74	245,337.64
	Vision								
	Total	14,025,974.45	442,159.88		14,468,134.33		14,468,134.33	14,025,974.45	442,159.88
Closed	Med								
	Dental								
	Rx								
	Vision								
	Total								
	TOTAL	381,288,585.51	2,101,327.30		383,389,912.81		383,389,912.81	381,288,585.51	2,101,327.30

Central Jersey Health Insurance Fund

SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED

2020									
May									
Med	Dental	Rx	Vision	Medicare Advantage	Reinsurance	DMO Premiums	Future	Admin	TOTAL
12,158,478.20	406,598.94	3,120,266.47	41,261.47	6,934,815.13	(130,637.17)	10,548.31	29.40	(145,282.71)	22,396,078.04
2,889,884.91	185,394.51	932,807.62	2,351.80	229,272.89	194,238.00	3,589.92		311,258.70	4,748,798.35
1,139.02	38.08	367.22	3.86	682.32		0.99		33.39	2,264.88
1,139.02	38.08	367.22	3.86	682.32		0.99		33.39	2,264.88
21,979.85		18,581.38							40,561.23
2,913,003.78	185,432.59	951,756.22	2,355.66	229,955.21	194,238.00	3,590.91		311,292.09	4,791,624.46
1,287,779.99	23,634.78	789,912.53							2,101,327.30
				191,529.98	155,973.78			248,036.29	595,540.05
1,287,779.99	23,634.78	789,912.53		191,529.98	155,973.78			248,036.29	2,696,867.35
13,783,701.99	568,396.75	3,282,110.16	43,617.13	6,973,240.36	(92,372.95)	14,139.22	29.40	(82,026.91)	24,490,835.15

Central Jersey Health Insurance Fund							
ALL FUND YEARS COMBINED							
CURRENT MONTH	May						
CURRENT FUND YEAR	2020						
<div> <div> Description: Instrument #1 Instr #2 Instr #3 Instr #4 Instr #5 Instr #6 ID Number: N.J.C.M.F. Bank of NY TD Bank Investments Ocean First Admin. Maturity (Yrs) Purchase Yield: Old </div> </div>							
TOTAL for All Accts & instruments							
Opening Cash & Investment Balance	22,396,077.83	-	3,652,411.56	-	-	8,987,246.87	9,756,419.40
Opening Interest Accrual Balance	5,617.78	-	-	-	-	5,617.78	-
1 Interest Accrued and/or Interest Cost	3,380.96					3,380.96	
2 Interest Accrued - discounted Instr.s							
3 (Amortization and/or Interest Cost)							
4 Accretion							
5 Interest Paid - Cash Instr.s	6,432.70		882.63			(876.94)	6,427.01
6 Interest Paid - Term Instr.s							
7 Realized Gain (Loss)	(4,167.82)					(4,167.82)	
8 Net Investment Income	5,645.84		882.63			(1,663.80)	6,427.01
9 Deposits - Purchases	4,789,359.58						4,789,359.58
# (Withdrawals - Sales)	(2,696,867.35)						(2,696,867.35)
Ending Cash & Investment Balance	24,490,834.94	-	3,653,294.19	-	-	8,982,202.11	11,855,338.64
Ending Interest Accrual Balance	8,998.74	-	-	-	-	8,998.74	-
Plus Outstanding Checks	17,641.54	-	-	-	-	-	17,641.54
(Less Deposits in Transit)	-	-	-	-	-	-	-
Balance per Bank	24,508,476.48	-	3,653,294.19	-	-	8,982,202.11	11,872,980.18
Annualized Rate of Return This Month	0.29%		0.29%			-0.22%	0.71%

RESOLUTION NO. 20-20

**CENTRAL JERSEY HEALTH INSURANCE FUND
APPROVAL OF THE JUNE AND JULY 2020 BILLS LISTS**

WHEREAS, the Central Jersey Health Insurance Fund held a Public Meeting on **May 20, 2020** for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of February, March, April and May 2020 for consideration and approval of the Executive Committee; and

WHEREAS, The Treasurer for the Fund presented a Treasurers Report which detailed the claims payments and imprest transfers for the Fund for the Month of March for all Fund Years for consideration and approval of the Executive Committee; and

WHEREAS, a quorum of the Executive Committee was present thereby conforming with the By-laws of the Fund to conduct official business of the Fund,

NOW THEREFORE BE IT RESOLVED the Commissioners of the Executive Committee of the Central Jersey Health Insurance Fund hereby approve the Bills List for February, March, April and May 2020 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for Municipal Health Insurance Funds.

NOW, THEREFORE BE IT FURTHER RESOLVED, the Commissioners of the Executive Committee of the Central Jersey Health Insurance Fund hereby approve the Treasurers Report as furnished by the Treasurer of the Fund and concur with actions undertaken by the Treasurer, in accordance with the laws and regulations promulgated by the State of New Jersey for Municipal Health Insurance Funds.

ADOPTED: May 2020, 2020

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY



CENTRAL JERSEY HEALTH INSURANCE FUND

Monthly Claim Activity Report

July 15, 2020



CENTRAL JERSEY HEALTH INSURANCE FUND

		<u>MEDICAL CLAIMS PAID 2020</u>	<u># OF EES</u>	<u>PER EE</u>
JANUARY		\$1,267,894	1613	786
FEBRUARY		\$1,760,412	1591	1,106
MARCH		\$2,343,550	1590	1,474
APRIL		\$1,158,223	1593	727
MAY		\$1,324,407	1592	831
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
TOTAL		\$7,854,486		
		2020 Average	1596	\$ 985
		2019 Average	1082	\$ 1,294

Large Claimant Report (Drilldown) - Claims Over \$50000

Plan Sponsor Unique ID :	All	Paid Dates:	04/01/2020 - 04/30/2020
Customer:	CENTRAL JERSEY HEALTH INSURANCE FUND	Service Dates:	01/01/1900 - 04/30/2020
Group / Control:	00143735,00285786,00659552,00737415,00866354,SI362223	Line of Business:	All

	Billed Amt	Paid Amt
	\$81,509.69	\$81,509.69
TOTAL:	\$81,509.69	\$81,509.69

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Large Claimant Report (Drilldown) - Claims Over \$50000

Plan Sponsor Unique ID : All
Customer: CENTRAL JERSEY HEALTH INSURANCE FUND
Group / Control: 00143735,00285786,00659552,00737415,00866354,SI362223
Subgroup / Suffix: All

Paid Dates: 05/01/2020 - 05/31/2020
Service Dates: 01/01/1900 - 05/31/2020
Line of Business: All
Funding Category: All

	Billed Amt	Paid Amt
	\$210,446.00	\$111,536.38
	\$90,136.44	\$60,119.57
	\$100,714.53	\$57,925.73
TOTAL:	\$401,296.97	\$229,581.68

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Central Jersey Health Insurance Fund
6/1/2020 through 5/31/2020 (Unless otherwise noted)

**Medical Claims Paid Per Member:
Jan 2020-May 31, 2020**

Total Medical Paid per EE: **\$985.00**

Network Discounts

Inpatient: **64.0%**
Ambulatory: **67.4%**
Physician/Other: **63.9%**
TOTAL: 65.2%

Provider Network

% Admissions In-Network: **97.8%**
% Physician Office: **89.3%**

Aetna Book of Business:
Admissions 98.0%; Physician 90.5%

**Top Facilities Utilized (by total
Medical Spend)**

- Ocean Medical Center
- Jersey Shore Medical
- Morristown Memorial
- RWJUH New Brunswick
- Riverview Medical Center

**Catastrophic Claim Impact
(YTD Jan- May, 31 2020)**

Number of Claims Over \$50,000: 16
Claimants per 1000 members: **4.0**
Avg. Paid per Claimant: **\$82,313**
Percent of Total Paid: **18.1%**
• Aetna BOB- HCC account for an
average of 41.9% of total Medical Cost

**Nurse Case Member Outreach:
Through Q4 2019**

Unique Members Identified: **176**
Outreach Opportunities Identified: **140**
Outreach in Progress: **13**
Completed Outreach: **161**

Closed with Engagement: **46**
Unable to Reach: 108
Member Declined: **2**

Teladoc Activity: Jan – May 2020

Total Registrations: **126**
Total Online Visits: **136**
Total Net Claims Savings: **\$21,657**
Total Visits w/ Rx: **96**
Member Satisfaction Rating / Avg.
71% Outstanding 29% Good

**Allentown Service Center
Performance: Q1 2020 Metrics**

Customer Service Performance

Call Quality: **98.6%**
1st Call Resolution: **94.5%**
Abandonment Rate: **1.3%**
Avg. Speed of Answer: **28.7 sec**

Claims Performance

Financial Accuracy: **99.6% (Q4)**
Turnaround w/in 15 days: **8.1 days**
Turnaround w/in 31 days: **6.1 days**

Performance Goals

Call Quality: 94%
1st Call Resolution: 89%
Abandonment Rate less than: 3.5%
Average Speed of Answer: 31 sec

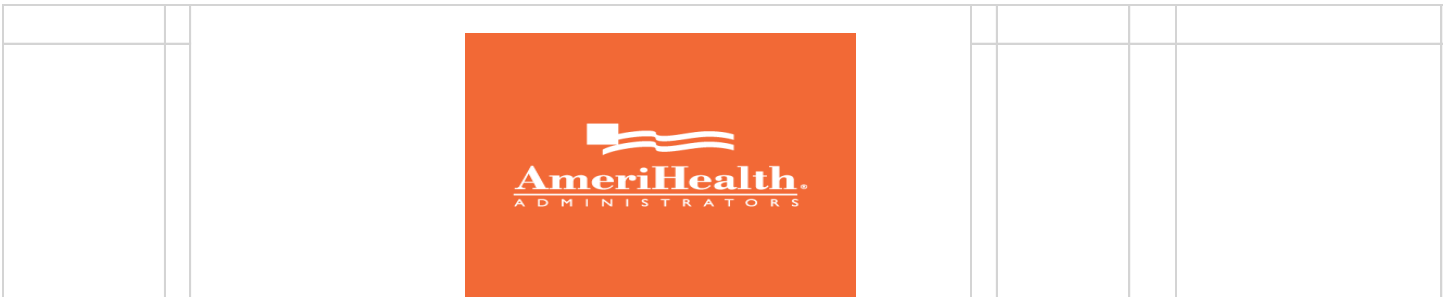
Financial Accuracy: 98%

Turnaround Time

90% processed w/in: 15 days
95% processed w/in: 31 days



AmeriHealth®
ADMINISTRATORS



2020 Central HIF

			MEDICAL CLAIMS PAID 2020	TOTAL	# OF EES		PER EE	
JANUARY			\$10,516.00	\$10,516.00	19		\$553.47	
FEBRUARY			\$10,869.00	\$10,869.00	19		\$572.05	
MARCH			\$26,204.71	\$26,204.71	19		\$1,379.19	
APRIL			\$15,189.60	\$15,189.60	19		\$799.45	
MAY			\$7,611.95	\$7,611.95	19		\$400.63	
JUNE			\$47,480.76	\$47,480.76	19		\$2,498.97	
JULY								
AUGUST								
SEPTEMBER								
OCTOBER								
NOVEMBER								
DECEMBER								
TOTALS			\$117,872.02	\$117,872.02				
				2020 Average	19		\$1,033.96	



PLAN SPONSOR INFORMATION SERVICES
Large Claimant Report- Claims Over \$50,000.00

Group:	Central New Jersey HIF	Service Dates:	-
Paid Dates:	6/1/20-6/30/20	Line of Business:	All
Network Service	ALL	Product Line:	All

Member	Condition	Paid Amount
Spouse	ACUTE PROMYELOCYTIC LEUKEMIA	\$40,972.46

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CENTRAL NEW JERSEY HEALTH INSURANCE FUND - 0002189322

Claims Paid between 3/1/2020 and 7/10/2020

COVID19 Claims currently are consider to be claims with Procedure codes

'U0001','U0002','G2023','G2024','87635','86328','86769','U0003','U0004','C9803','G2025','0202U','E0445','87426','0223U','0224U' or a Dx Code of 'U07.1','B34.2','B97.29','Z20.828'

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
<1	0	0	\$0.00	\$0.00	\$0.00
1-5	1	1	\$53.00	\$53.00	\$2.41
6-18	0	0	\$0.00	\$0.00	\$0.00
19-25	0	0	\$0.00	\$0.00	\$0.00
26-39	0	0	\$0.00	\$0.00	\$0.00
40-64	2	9	\$3,950.95	\$438.99	\$30.87
65+	0	0	\$0.00	\$0.00	\$0.00
Unknown	0	0	\$0.00	\$0.00	\$0.00

REL TO INS	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Employee	0	0	\$0.00	\$0.00	\$0.00
Spouse	2	9	\$3,950.95	\$438.99	\$60.78
Dependent	1	1	\$53.00	\$53.00	\$0.45

GENDER	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Female	2	9	\$4,003.95	\$444.88	\$27.42
Male	1	1	\$0.00	\$0.00	\$0.00
Undisclosed	0	0	\$0.00	\$0.00	\$0.00

ST CD	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
NJ	3	10	\$4,003.95	\$400.40	\$14.30

Summary by Service Type - Outpatient and Professional Claims

Service Types are Limited to: Emergency Room, Pathology (Laboratory), Urgent Care, Retail Clinic, Telemedicine, Emergency Room, Pathology (Laboratory), Urgent Care, Retail Clinic, Telemedicine, Office Physician Visit, and Other Physician Visit

SRVC TP DSC	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Emergency Room	1	2	\$3,328.96	\$1,664.48	\$11.89
Office Physician Visit	1	1	\$98.52	\$98.52	\$0.35
Pathology (Laboratory)	1	2	\$319.74	\$159.87	\$1.14
Telemedicine	2	3	\$108.53	\$36.18	\$0.39

Inpatient Cost and Utilization by Age Band

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	ADM CNT	NET PAY	ADM PER 1000	COST PER ADM	COST PMPM	AVG LOS
<1	0	0	0	\$0.00	0	\$0.00	\$0.00	0
1-5	0	0	0	\$0.00	0	\$0.00	\$0.00	0
6-18	0	0	0	\$0.00	0	\$0.00	\$0.00	0
19-25	0	0	0	\$0.00	0	\$0.00	\$0.00	0
26-39	0	0	0	\$0.00	0	\$0.00	\$0.00	0
40-64	0	0	0	\$0.00	0	\$0.00	\$0.00	0
65+	0	0	0	\$0.00	0	\$0.00	\$0.00	0
Unknown	0	0	0	\$0.00	0	\$0.00	\$0.00	0

TOP PROVIDERS(TOP 25 BY NET PAYMENT)

PROVIDER NAME	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Southern Ocean Medical Center	2	3	\$2,906.86	\$968.95	\$10.38
Barron Emergency Physicians	1	1	\$849.39	\$849.39	\$3.03
Atlanticare Physician Group PA	1	3	\$154.05	\$51.35	\$0.55
Pediatric Affiliates PA	1	1	\$53.00	\$53.00	\$0.19
Meridian Lab Physicians	1	1	\$26.50	\$26.50	\$0.09
Coastal Imaging	1	1	\$14.15	\$14.15	\$0.05



EXPRESS SCRIPTS®

Central Jersey Health Insurance Fund

Total Component/Date of Service (Month)	201901	201902	201903	2019Q1	201904	201905	201906	2019Q2	201907	201908	201909	2019Q3	201910	201911	201912	2019Q4	2019YTD
Membership	3,178	3,170	3,175	3,174	3,167	3,178	3,214	3,186	3,221	3,225	3,216	3,221	3,218	3,216	3,219	3,218	3,200
Total Days	128,496	117,292	119,574	365,362	123,916	127,483	114,309	365,708	125,703	124,143	118,332	368,178	131,990	116,474	128,971	377,435	1,476,683
Total Patients	1,298	1,263	1,270	1,980	1,234	1,239	1,161	1,875	1,181	1,201	1,169	1,836	1,278	1,236	1,314	1,979	2,661
Total Plan Cost	\$536,010	\$492,303	\$557,118	\$1,585,432	\$495,133	\$572,789	\$505,287	\$1,573,209	\$519,167	\$499,749	\$572,514	\$1,591,430	\$630,039	\$499,213	\$614,634	\$1,743,886	\$6,493,956
Generic Fill Rate (GFR) - Total	82.7%	81.9%	81.6%	82.1%	81.8%	81.3%	81.5%	81.5%	81.3%	79.9%	80.9%	80.7%	80.2%	81.6%	82.8%	81.5%	81.5%
Plan Cost PMPM	\$168.66	\$155.30	\$175.47	\$166.48	\$156.34	\$180.24	\$157.21	\$164.58	\$161.18	\$154.96	\$178.02	\$164.71	\$195.79	\$155.23	\$190.94	\$180.66	\$169.13
Total Specialty Plan Cost	\$142,908	\$120,463	\$142,181	\$405,552	\$101,574	\$153,367	\$123,406	\$378,347	\$130,103	\$95,810	\$171,362	\$397,275	\$204,364	\$138,833	\$196,912	\$540,109	\$1,721,284
Specialty % of Total Specialty Plan Cost	26.7%	24.5%	25.5%	25.6%	20.5%	26.8%	24.4%	24.0%	25.1%	19.2%	29.9%	25.0%	32.4%	27.8%	32.0%	31.0%	26.5%

Total Component/Date of Service (Month)	202001	202002	202003	2020Q1	202004	202005	202006	2020Q2	202007	202008	202009	2020Q3	202010	202011	202012	2020Q4	2020YTD
Membership	3,185	3,175	3,175	3,178	3,190	3,173											
Total Days	134,092	121,682	143,222	398,996	124,911	116,654											
Total Patients	1,329	1,266	1,283	1,975	1,076	1,017											
Total Plan Cost	\$538,858	\$593,799	\$613,723	\$1,746,379	\$512,148	\$580,115											
Generic Fill Rate (GFR) - Total	83.3%	82.6%	81.4%	82.4%	82.0%	80.6%											
Plan Cost PMPM	\$169.19	\$187.02	\$193.30	\$183.15	\$160.55	\$182.83											
% Change Plan Cost PMPM	0.3%	20.4%	10.2%	10.0%	2.7%	1.4%											
Total Specialty Plan Cost	\$153,988	\$160,142	\$179,998	\$494,129	\$136,915	\$191,952											
Specialty % of Total Specialty Plan Cost	28.6%	27.0%	29.3%	28.3%	26.7%	33.1%											

PMPM	
Jan - May 2019	\$167.21
Jan - May 2020	\$178.55
Trend - Jan - May 2020	6.8%

Key Performance Indicator YTD by Population

CENTRAL JERSEY HEALTH INSUR.

Prescription Service Dates: 01/2020 - 06/2020

	JAN 2020	FEB 2020	MAR 2020	APR 2020	MAY 2020	JUN 2020	YTD
Members	3,185	3,175	3,175	3,190	3,173	3,173	3,179
Patients	1,300	1,233	1,254	1,041	999	1,077	2,147
Rx Count	3,180	2,946	3,049	2,379	2,221	2,396	16,171
Rxs PMPM	1.00	0.93	0.96	0.75	0.70	0.76	0.85
AWP	\$1,145,607.15	\$1,183,704.56	\$1,282,511.38	\$1,050,955.59	\$1,131,139.59	\$1,090,723.61	\$6,884,642
Ingredient Cost	\$594,541.15	\$652,779.06	\$670,088.13	\$549,524.72	\$621,688.65	\$575,720.14	\$3,664,342
Plan Cost	\$538,858.09	\$593,798.81	\$613,812.16	\$510,185.77	\$581,313.82	\$531,588.23	\$3,369,557
Dispensing Fee	\$1,921.10	\$1,782.45	\$1,650.80	\$1,253.10	\$1,356.25	\$1,259.45	\$9,223
Sales Tax	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0
Deductible	\$5,169.19	\$1,020.23	\$1,722.39	\$126.12	\$135.98	\$538.81	\$8,713
Copay	\$52,434.97	\$59,742.47	\$56,289.02	\$40,465.93	\$41,615.10	\$44,872.55	\$295,420
Plan Cost/Rx	\$169.45	\$201.56	\$201.32	\$214.45	\$261.74	\$221.86	\$208.37
Disp Fee/Rx	\$0.60	\$0.61	\$0.54	\$0.53	\$0.61	\$0.53	\$0.57
Copay/Rx	\$16.49	\$20.28	\$18.46	\$17.01	\$18.74	\$18.73	\$18.27
Plan Cost PMPM	\$169.19	\$187.02	\$193.33	\$159.93	\$183.21	\$167.53	\$176.68
Days PMPM	42.10	38.33	45.11	39.15	36.79	38.94	40.07
Preferred Drug Compliance %	96.0 %	95.6 %	95.5 %	95.2 %	95.3 %	95.9 %	95.6 %
Generic Conversion %	97.6 %	97.4 %	96.6 %	96.5 %	96.9 %	96.8 %	97.0 %
Rx % - SSB	14.7 %	15.2 %	15.7 %	15.0 %	16.8 %	15.3 %	15.4 %
Rx % - MSB	2.0 %	2.2 %	2.9 %	2.9 %	2.6 %	2.7 %	2.5 %

Key Performance Indicator YTD by Carrier

CENTRAL JERSEY HEALTH INSUR.

Prescription Service Dates: 01/2020 - 06/2020

CENTRAL JERSEY HEALTH INS (CJHA)

	JAN 2020	FEB 2020	MAR 2020	APR 2020	MAY 2020	JUN 2020	YTD
Members	3,185	3,175	3,175	3,190	3,173	3,173	3,179
Patients	1,300	1,233	1,254	1,041	999	1,077	2,147
Rx Count	3,180	2,946	3,049	2,379	2,221	2,396	16,171
Rxs PMPM	1.00	0.93	0.96	0.75	0.70	0.76	0.85
AWP	\$1,145,607.15	\$1,183,704.56	\$1,282,511.38	\$1,050,955.59	\$1,131,139.59	\$1,090,723.61	\$6,884,642
Ingredient Cost	\$594,541.15	\$652,779.06	\$670,088.13	\$549,524.72	\$621,688.65	\$575,720.14	\$3,664,342
Plan Cost	\$538,858.09	\$593,798.81	\$613,612.16	\$510,185.77	\$581,313.82	\$531,588.23	\$3,369,557
Dispensing Fee	\$1,921.10	\$1,782.45	\$1,650.80	\$1,253.10	\$1,356.25	\$1,259.45	\$9,223
Sales Tax	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0
Deductible	\$5,169.19	\$1,020.23	\$1,722.39	\$126.12	\$135.98	\$538.81	\$8,713
Copay	\$52,434.97	\$59,742.47	\$56,289.02	\$40,465.93	\$41,615.10	\$44,872.55	\$295,420
Plan Cost/Rx	\$169.45	\$201.56	\$201.32	\$214.45	\$261.74	\$221.86	\$208.37
Disp Fee/Rx	\$0.60	\$0.61	\$0.54	\$0.53	\$0.61	\$0.53	\$0.57
Copay/Rx	\$16.49	\$20.28	\$18.46	\$17.01	\$18.74	\$18.73	\$18.27
Plan Cost PMPM	\$169.19	\$187.02	\$193.33	\$159.93	\$183.21	\$167.53	\$176.68
Days PMPM	42.10	38.33	45.11	39.15	36.79	38.94	40.07
Preferred Drug Compliance %	96.0 %	95.6 %	95.5 %	95.2 %	95.3 %	95.9 %	95.6 %
Generic Conversion %	97.6 %	97.4 %	96.6 %	96.5 %	96.9 %	96.8 %	97.0 %
Rx % - SSB	14.7 %	15.2 %	15.7 %	15.0 %	16.8 %	15.3 %	15.4 %
Rx % - MSB	2.0 %	2.2 %	2.9 %	2.9 %	2.6 %	2.7 %	2.5 %



Source:	Trend Central
Report	
Category:	Key Performance Metrics
Name:	KP120 Key Performance Indicator YTD by Population
Type:	Standard
Settings	
Population:	CENTRAL JERSEY HEALTH INSUR.
Date Type:	Service Date
YTD Reporting Year:	2020
Filters	
Mail / Retail Selection:	Both
Brand / Generic Selection:	Both
InHouse Pharmacy Claims Selection:	All Claims
Specialty Drug Selection:	All Claims - Specialty & Non-Specialty
Hierarchy Level Selection:	Carrier
Member Count Method:	PMPM
Delivery	
Run Date:	7/9/20 9:12:15 AM GMT-04:00

APPENDIX I

**CENTRAL JERSEY HEALTH INSURANCE FUND
OPEN MINUTES
MAY 20, 2020
BRIELLE BOROUGH MUNICIPAL BUILDING
1:30 PM**

Meeting called to order by Chairman Thomas Nolan. The Open Public Meeting notice read into record.

PLEDGE OF ALLEGIANCE

MEETING OF EXECUTIVE COMMITTEE CALLED TO ORDER

ROLL CALL OF 2020 EXECUTIVE COMMITTEE:

CHAIRPERSON		
Thomas Nolan	Borough of Brielle	Present
SECRETARY		
William Rieker	Township of Lakewood	Present
EXECUTIVE	COMMITTEE	
Joseph Gilsenan	Township of Brick	Present
Diane Lapp	Township of Manchester	Present
Adam Hubeny	Borough of Atlantic Highlands	Present
Donato Nieman	Township of Montgomery	Present
Brian Valentino	Western Monmouth MUA	Present
ALTERNATES:		
Brian Dempsey	Spring Lake	Present
Brian Brach	Manasquan RRSA	Present

APPOINTED OFFICIALS PRESENT:

Executive Director/Administrator	PERMA Risk Management Services	Paul Laracy Emily Koval Karen Kamprath	Present Present Present
Program Manager	Conner Strong & Buckelew	Brandon Lodics Marybeth Visconti	Present Present
Attorney	Berry, Sahradnik, Kotzas & Benson	Jack Sahradnik	Present
Treasurer		Stephen Mayer	Present
Network & Medical Claims Service	Aetna	Jason Silverstein	Present
Network & Medical Claims Service	AmeriHealth	Kristina Strain	Present
Dental Claims Service	Delta Dental	Luhra Ebarle	Present
Rx Administrator	Express Scripts	Kyle Colalillo Ken Rostkowski	Present Present

Auditor	Holman & Frenia	Lauren Holman	Present
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OTHERS PRESENT:

Cindy Toye, Toms River MUA
Christopher Mullins, Highlands BOE
Tom Fletcher, Acrisure
Joseph Zanga, South River
Ted Lewis, Eatontown Sewer Authority
John Casagrande, Danskin Agency
Anthony Tonzini, Integrity

CORRESPONDENCE: None

APPROVAL OF MINUTES: JANUARY 15, 2020 OPEN:

MOTION TO APPROVE OPEN MINUTES OF JANUARY 15, 2020

MOTION:	Commissioner Gilsenan
SECOND:	Commissioner Nieman
VOTE:	Unanimous

EXECUTIVE DIRECTOR'S REPORT

Executive Director said that this will be Commissioner Gilsenan's last meeting as he is retiring. He was presented with a clock from the Fund.

FINANCIAL FAST TRACK as of March 31, 2020 – Executive Director said the Financial Fast track shows a ytd surplus of \$1.3 million with an overall surplus of \$23 million.

AUDITOR AND ACTUARY YEAR-END REPORTS – Executive Director said the Finance Committee met prior to the meeting to review the Audit. Ms. Holman from Holman & Frenia was in attendance and provided an overview of the 2019 Audit. Ms. Holman said there were no comments or recommendations.

IBNR - ACTUARY CERTIFICATION – Executive Director said at the end of each Fund year, the Actuary must certify that the Fund is reserving enough funds for incurred but not reported (IBNR) claims. The Actuary has reviewed the claims and financial fast track through the end of the year and has determined a range for which he believes will be a conservative reserve. His certification and range development was included in the Agenda.

REQUESTS FOR PROPOSALS – Executive Director said under the Local Public Contracts law, the will need to RFP for the Actuary, Auditor, Attorney and Treasure positions for a 1 year term beginning January 1, 2021. She said the other option is to allow the executive committee to extend the current contracts for 1 additional term. The Committee voted to extend the current contracts rather than go out for RFP.

MOTION TO APPROVE THE EXTENSION OF THE CURRENT ACTUARY, AUDITOR, ATTORNEY AND TREASURE CONTRACTS FOR 1 ADDITIONAL TERM OF JANUARY 1, 2021 - DECEMBER 31, 2021.

MOTION:	Commissioner Gilsenan
SECOND:	Commissioner Hubeny
VOTE:	Unanimous

RISK MANAGEMENT PLAN - AMENDMENT - Executive Director said an internal review of the enrollment process was performed and found that the process of partial month transactions was not consistent across all of our Funds. In order to synchronize enrollments with accounts payable, we are recommending the following standard 'rule' for rate charging for enrollments during any given month:

24.) PARTIAL MONTH ENROLLMENTS

When processing enrollments and terminations, the Fund will charge a member for a full month rate for an employee that is enrolled between the 1st and the 15th of the month, but will charge the member in the following month if an enrollment occurred between the 16th and the 31st of the month. If a member should term between the 1st and the 15th of the month, the Fund will not charge the member a rate for the enrollment, but will charge a full month rate if a member terms between the 16th and the 31st of the month.

Executive Director said a resolution authorizing this is included in the consent agenda.

MRHIF ACTION ON PHARMACY CONSULTANT AND ESI CONTRACT - Executive Director said the MRHIF has awarded a contract to ELMC, Inc., the incumbent consultant, to assist the MRHIF in negotiating a contract renewal with ESI for the period 1/1/2021 to 6/30/2021. The MRHIF will also be issuing an RFP later this year for a consultant to assist with issuing and RFP for a new multi-year contract with ESI or another provider effective 7/1/2021.

MRHIF AUDIT OF AMERIHEALTH - Executive Director said the MRHIF commissioned an audit of AHA for the Schools HIF, the Coastal HIF, and the Central Jersey HIF. The report was completed with favorable results for AHA in terms of processing accuracy but with some observations and recommendations regarding service metrics. AHA is preparing a response to the recommendations that we hope to have for our next meeting.

FINANCIAL DISCLOSURE STATEMENTS - Executive Director said as is done on the local level and required by State law, each Fund Commissioner is required to complete a Financial Disclosure Statement through the Department of Community Affairs. The 2020 notice with instructions has been released. To date there are only 2 Commissioners that have not filed and they have been notified to complete.

LAKEWOOD TOWNSHIP WELLNESS GRANT – Executive Director said the Township of Lakewood submitted a wellness grant request in the amount of \$17,000 for a program with all approved expenses. There is only \$5,500 remaining in the 2020 wellness budget. We are requesting the remaining funds be designated to Lakewood and at the end of the year if there are unused funds, consider transferring to the balance of their wellness account. Resolution 18-20 is included in the consent agenda and approves their wellness grant in the amount of \$17,000 of which \$5,500 will come from the wellness budget and the remaining \$11,500 will be paid from the positive fund balance in the Lakewood account.

PROGRAM MANAGER’S REPORT

ELIGIBILITY/ENROLLMENT:

Please direct any eligibility, enrollment, or system related questions to our dedicated CJHIF enrollment team. The team can be reached by email at cjhifenrollments@permainc.com or by fax at 856-552-2175.

MONTHLY BILLING

As a reminder, please be sure to check your monthly invoice for accuracy. *Please confirm the invoice detail as retro adjustments are limited to two months by Fund policy.* If you find a discrepancy, please report it to the CJHIF eligibility/enrollment team cjhifenrollments@permainc.com or by fax at 856-552-2175.

BROKER CONTACT INFORMATION

Please direct any escalated claims, benefit coverages, prescription coverage, Medicare advantage or appeal related questions to our dedicated CJHIF Client Servicing Team. The team can be reached by email at brokerservices@permainc.com.

AETNA UPDATE

COVID-19 Update -

Program Manager said the Fund has agreed to the following Aetna COVID-19 coverage updates.

- Member cost-share waived for diagnostic testing and treatment
- Antibody testing covered with no cost-share
- Relaxed in-patient precertification requirement

Please visit this webpage for more information on how Aetna is handling COVID-19 related benefit developments:

<https://www.aetna.com/individuals-families/member-rights-resources/need-to-know-coronavirus.html>.

EXPRESS SCRIPTS UPDATE

National Preferred Formulary (NPF) Update -

Program Manager said the Fund utilizes Express Script’s National Preferred Formulary (NPF). Every 6 months, Express Scripts reviews the NPF for new additions/exclusions. Beginning July 1, 2020, 47 products will be excluded from the NPF. Members prescribed these medications on or after July 1, 2020 should discuss possible alternatives with their prescribing physicians. **Due to the COVID-19**

pandemic, current users of these medications will be granted an extension and can continue to fill these prescriptions until January 2021.

Ranitidine (Zantac) Withdrawal - The US Food and Drug Administration has announced they have requested manufacturers withdraw all prescriptions and over-the-counter (OTC) drugs containing ranitidine from the market. This is the latest step in an ongoing investigation of a contaminant known as N-Nitrosodimethylamine (NDMA) in ranitidine medications. ESI identified 5 Fund members who are impacted by this withdrawal. These individuals have been sent direct communications and are recommended to discuss alternative drugs with their health care provider.

DELTA DENTAL UPDATE

Program Manager said effective immediately, due to COVID-19, Delta Dental has advised that they will not be printing member ID cards. The attached flyer provides more information for members.

LEGISLATIVE UPDATE

New COBRA Regulations -

Program Manager said that due to the COVID-19 pandemic, the Department of Labor (DOL) and the Internal Revenue Service (IRS) recently issued guidance for group health plan sponsors regarding deadline extensions for COBRA, Flexible Spending Accounts (FSAs), and Health Reimbursement Arrangements (HRAs). The extended timeframes are intended to assist employers, employees and dependents who may have difficulty meeting standard timeframes associated with COBRA. The new ruling establishes an "Outbreak Period" defined as beginning with the declaration of a National State of Emergency on March 1, 2020 running through the duration of the Emergency plus a 60-day period following the date the National State of Emergency ends. At this time, an end date has not been specified for the National State of Emergency so the "Outbreak Period" cannot yet be determined.

The DOL guidance provides the below timeframe extensions derived by disregarding the Outbreak Period:

- Extension of the 30-day and 60-day special enrollment timeframes
- Extension of the 60-day COBRA election period
- Extension of the 45-day initial premium payment timeframe
- Extension of the 30-day grace period for subsequent premium payments
- Extension of the 60-day COBRA notification timeframe

The chart below compares the current time-frames with the new guidelines.

COBRA		
NOTICE/EVENT	PRE-PANDEMIC	CHANGE
Initial Notice of COBRA Rights	Within first 90 days	Clarification required
Election Notice	Within 14 days of Qualifying Life Event	Clarification required
Election Period	Within 60 days	60 days after the end of the "outbreak period"
Initial Payment	Within 45 days	Within 45 days after the end of the "outbreak period"
Grace period for non-payment	30 days	30 days after "outbreak period"

We are working with Benefit Express, the Fund's COBRA administrator to ensure they are taking the necessary measures to comply with and administer the new timeframes for eligible lines of coverage administered by the Fund. We will provide updated information and correspondence when they are available.

For more information, please click on this link to the DOL's COVID-19 FAQ:
<https://www.dol.gov/sites/dolgov/files/EBSA/about-ebsa/our-activities/resource-center/faqs/covid-19.pdf>

ADMINISTRATIVE AUTHORIZATIONS

There are no appeals or administrative authorizations needed.

TREASURER – Fund Treasurer said the bills list is included in the agenda.

February 2020 – Confirmation of Payment

FUND YEAR 2019	\$15,963.00
FUND YEAR 2020	\$505,858.86
TOTAL ALL FUND YEARS	\$521,821.86

March 2020 – Confirmation of Payment

FUND YEAR 2019	\$18,565.39
FUND YEAR 2020	\$612,640.15
TOTAL ALL FUND YEARS	\$631,205.54

April 2020 – Confirmation of Payment

FUND YEAR 2019	\$11,805.95
FUND YEAR 2020	\$611,350.62
TOTAL ALL FUND YEARS	\$623,156.57

May 2020 – Resolution 19-20

FUND YEAR 2019	\$1,908.33
FUND YEAR 2020	\$593,631.72
TOTAL ALL FUND YEARS	\$595,540.05

ATTORNEY: None

AETNA: Mr. Silverstein reviewed the claims for March 2020. He also reviewed the dashboard report. He provided an update on the Covid-19 claims data which was distributed with the agenda.

AMERIHEALTH: Ms. Strain reviewed the claims through April 2020.

EXPRESS SCRIPTS: Mr. Colalillo said the January through April 2020 trend is at 8.5%. He also provided an updated on the Covid-19 data.

DELTA DENTAL: No report.

NEW BUSINESS: None

OLD BUSINESS: None

PUBLIC COMMENT: None

MOTION TO APROVE THE CONSENT AGENDA INCLUDING RESOLUTIONS 16-20 THROUGH 19-20:

MOTION:	Commissioner Hubeny
SECOND:	Commissioner Gilsenan
VOTE:	Unanimous

MOTION TO ADJOURN MEETING:

MOTION:	Commissioner Gilsenan
SECOND:	Commissioner Nieman
VOTE:	Unanimous

MEETING ADJOURNED: 2:00 pm

Minutes Prepared by: Karen Kamprath , Assisting Secretary

Next Meeting: September 16, 2020 1:30 pm